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Bib Data Sheet

CONFIRMATION NO. 3710

|   |   |                                       |   |  |                                |
|---|---|---------------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/839,273  | <b>FILING DATE</b><br>04/20/2001<br><b>RULE</b>   | <b>CLASS</b><br><del>378</del><br>455 | <b>GROUP ART UNIT</b><br><del>2645</del><br>2682  | <b>ATTORNEY DOCKET NO.</b><br>Trombatore 1 |                                |
| <b>APPLICANTS</b><br>Charles Paul Trombatore, Palatine, IL;<br><b>** CONTINUING DATA *****</b> <i>NONE</i><br><b>** FOREIGN APPLICATIONS *****</b> <i>NONE</i><br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/12/2001  |   |                                       |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>AB</i> Allowance<br>Verified and <i>AB</i><br>Acknowledged Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>IL         | <b>SHEETS DRAWING</b><br>1  | <b>TOTAL CLAIMS</b><br>22                  | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>Gregory P. Gadson, Esq.<br>19375 Amber Way<br>Indianapolis, IN 46060  |   |                                       |   |  |                                |
| <b>TITLE</b><br>Cellular based universal telephone system adapted for both cellular and land line mimicked service  |   |                                       |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>746   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                       | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit _____ |  |                                |